

DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN  PATENT APPLICATION		Attorney Docket No.	SSI-011
		First Named Inventor	Wilkie
		COMPLETE IF KNOWN	
		Application Serial Number	09/747,293
		Filing Date	December 22, 2000
		Group Art Unit	1653
		Examiner Name	R. Teller

☐ Declaration      ☒ Declaration  
Submitted with      Submitted after Initial  
Initial Filing      Filing (surcharge  
37 CFR 1.16(c) required)

COPY

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Methods and Compositions for Sealing Tissue Leaks

(Title of the Invention)

the specification of which

☐ is attached hereto  
OR

☒ was filed on  
(MM/DD/YYYY)

12/22/2000

as United States Application Serial Number or PCT International

Application Number 09/747,293 and was amended on (MM/DD/YYYY) (if applicable).

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Direct all correspondence to:

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Given Name (first and middle [if any])				Family Name or Surname					
James				Wilkie					
Inventor's Signature		<i>James Wilkie</i>			Date				
					5/21/08				
Residence		City	Melrose	State	MA	Country	USA	Citizenship	USA
Mailing Address		11 Mount Hood Terrace							
Mailing Address (In. 2)		City	Melrose	State	MA	ZIP	02176	Country	USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
James				Rolke					
Inventor's Signature		<i>James M Rolke</i>			Date		May 20, 2008		
Residence		City	Fitzwilliam	State	NH	Country	USA	Citizenship	USA
Mailing Address		Old Country Road							
Mailing Address (In. 2)		City	Fitzwilliam	State	NH	ZIP	03447	Country	USA
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Shekharam		Tammishetti							
Inventor's Signature							Date		
Residence	City	Secunderabad	State	Andhra Pradesh	Country	India	Citizenship		
Mailing Address	12-10-206 Seetaphas Mandi								
Mailing Address (In. 2)	City	Secunderabad	State	Andhra Pradesh	ZIP	500361	Country	India	

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Given Name (first and middle [if any])		Family Name or Surname							
Sanyog Manohar		Pendharkar							
Inventor's Signature							Date		
Residence	City	Oldbridge	State	NJ	Country	USA	Citizenship	India	
Mailing Address	9 Larch Drive								
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Eugene		Pashkovski							
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2610546

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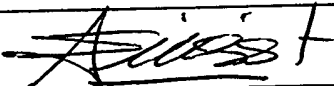
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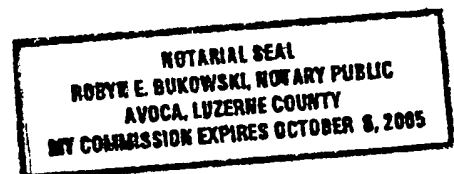
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6-6-03 Notary  
 Robyn Bukowski



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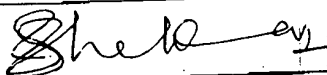
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Shekharam		Tammishetti						
Inventor's Signature		Date	May 20, 2003					
Residence	City	Secunderabad	State	Andhra Pradesh	Country	India	Citizenship	
Mailing Address	12-10-206 Seetaphas Mandi							
Mailing Address (In. 2)	City	Secunderabad	State	Andhra Pradesh	ZIP	500361	Country	India
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Sanyog Manohar		Pendharkar						
Inventor's Signature			Date					
Residence	City	Oldbridge	State	NJ	Country	USA	Citizenship	India
Mailing Address	9 Larch Drive							
Mailing Address (In. 2)	City	Oldbridge	State	NJ	ZIP	08857	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Eugene		Pashkovski						
Inventor's Signature			Date					
Residence	City	Bridgewater	State	NJ	Country	USA	Citizenship	USA
Mailing Address	1295 Colonial Way							
Mailing Address (In. 2)	City	Bridgewater	State	NJ	ZIP	01807	Country	USA

2610546

<b>DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN  PATENT APPLICATION</b>  <input type="checkbox"/> Declaration <input checked="" type="checkbox"/> Declaration Submitted with      Submitted after Initial Initial Filing      Filing (surcharge 37 CFR 1.16(e) required)	Attorney Docket No	SSI-011
	First Named Inventor	Wilkie
	<b>COMPLETE IF KNOWN</b>	
	Application Serial Number	09/747,293
	Filing Date	December 22, 2000
	Group Art Unit	1653
	Examiner Name	R. Teller

COPY

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Methods and Compositions for Sealing Tissue Leaks

(Title of the Invention)

the specification of which

☐ is attached hereto  
OR☒ was filed on  
(MM/DD/YYYY)

12/22/2000

as United States Application Serial Number or PCT International

Application Number

09/747,293

and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose to the Patent Office all information known by me to be material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet attached hereto.

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60/090,609	06/23/98	
60/199,469	04/25/00	
60/171,859	12/22/99	

## DECLARATION – Utility or Design Patent Application

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U.S. Parent Application or PCT Parent Serial Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
PCT/US99/14232	06/23/99	

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As a named inventor, I hereby appoint the following registered practitioners to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: ☐ Customer Number  → Place Customer  
Number Bar Code  
Label Here

OR  
☒ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
Andrew F. Abramson	P-52,538	Ira V. Heffan	41,059
Steven M. Bauer	31,481	Douglas J. Kline	35,574
Mark L. Beloborodov	50,773	John D. Lanza	40,060
John V. Bianco	36,748	Leigh J. Martinson	50,749
Robert S. Blasi	50,389	William A. Meunier	41,193
Michael H. Brodowski	41,640	Thomas C. Meyers	36,989
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Joseph A. Capraro, Jr.	36,471	Jeremy Occek	50,794
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Christopher H. Chung	50,351	Christopher W. Stamos	35,370
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James C. DeVellis	P-52,814	Robert J. Tosti	35,393
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Jennifer E. Grant	51,752		
Duncan A. Greenhalgh	38,678		
William R. Haulbrook	53,002		

☐ Additional registered practitioners named on supplemental Registered Practitioner Information sheet attached hereto.

Direct all correspondence to:


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 Testa, Hurwitz & Thibault, LLP  
 High Street Tower  
 125 High Street  
 Boston, MA 02110  
 Tel. No.: (617) 248-7000  
 Fax No.: (617) 248-7100

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

<b>Name of Sole or First Inventor:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])						Family Name or Surname			
James						Wilkie			
Inventor's Signature								Date	
Residence	City	Melrose	State	MA	Country	USA	Citizenship	USA	
Mailing Address		11 Mount Hood Terrace							
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<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
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James						Rolke			
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Luis						Burzio			
Inventor's Signature								Date	
Residence	City	Mountain Top	State	PA	Country	USA	Citizenship	USA	
Mailing Address		2 Marian Court							
Mailing Address (In. 2)	City	Mountain Top	State	PA	ZIP	18707	Country	USA	

DECLARATION AND  
POWER OF ATTORNEY FOR UTILITY  
OR DESIGN PATENT APPLICATION

ADDITIONAL INVENTOR(S)  
Supplemental Sheet  
Page 4 of 4

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DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN  PATENT APPLICATION		Attorney Docket No.	SSI-011
<input type="checkbox"/> Declaration <input checked="" type="checkbox"/> Declaration		First Named Inventor	Wilkie
Submitted with      Submitted after Initial		COMPLETE IF KNOWN	
Initial Filing      Filing (surcharge		Application Serial Number	09/747,293
37 CFR 1.16(e) required)		Filing Date	December 22, 2000
		Group Art Unit	1653
		Examiner Name	R. Teller

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<b>DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION</b>	<b>ADDITIONAL INVENTOR(S)</b> Supplemental Sheet Page <u>4</u> of <u>4</u>
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